							Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO							ξĠ					
		Effectiv	e Decemb	er 29, 1999		illingig Verduig	Q'	NE IS	53	100	878116	
		nn 2)	SM/	** . 1 . 1	ENTITY	OR	OTHER SMALL					
FO	R	NUMBE	R FILED (NÚMBER E	XTRA	RA	ΓE	FEE '	Î	RATE	FEE	
BAS	SIC FEE	// \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						345.00	OR		690.00	
TO	TAL CLAIMS	56	5 6 minus 20= * 3 6				9=	324	OR	X\$18=	l	
IND	EPENDENT CL	AIMS 2	1 2 minus 3 = * 9				9=	951	OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT							0=		OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2							AL	1021	OR	TOTAL		
CLAIMS AS AMENDED - PART II							•		,	OTHER		
	Do en vivea de viva de la sual estada	(Column 1)		(Column 2)	(Column 3)	SMA	ALLI		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**	=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***	=	ХЗ	9=		OR	X78=		
V	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDENT CLAIM		+13	iO=		OR	+260=		
						Ĺ	OTAL			TOTAL		
							. FEE		UN	ADDIT. FEE		
	THE STATE OF THE S	(Column 1) CLAIMS	PARTIES SAN	(Column 2) HIGHEST	(Column 3)			ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	**	=	X\$	9=		OR	X\$18=		
	Independent	•	Minus	***	=	ХЗ	9=		OR	X78=		
F	FIRST PRESE	NTATION OF N	IULTIPLE DEF	PENDENT CLAIM		+13	30=		OR	+260=		
							OTAL . FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)						. ,					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**	=	X\$	9=		OR	X\$18=		
	Independent	•	Minus	***	=	ХЗ	9=		OR	X78=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							 	1		1	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR		ļ	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
	The "Highest Nur	mber Previously P	ald For" (Total o	r Independent) is th	e highest number	found in	the ap	opropriate bo	x in c	olumn 1.		